U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE FEE RECORD SHEET

02/26/2004 RMRBI1 00000057 161445 10783790

01 FC:1001

770.00 DA

05/18/2004 HMDHAMM1 00000019 161445 10783790

01 FC:1201

86.00 DA

PTO-1556 (5/87)

*U.S. Government Printing Office: 2001 - 481-697/59173

PATENT APPLICATION FEE DETERMINATION RECORD

Application or Docket Number

Effective October 1, 2003

		SMALL ENTITY		OTHER THAN								
_			(Column 1)		(Column 2)		TYPE [OR SMALL ENTITY		
TOTAL CLAIMS			13				RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			13 minus 20=		*		X\$ 9=	······································		, X\$18=		
INDEPENDENT CLAIMS			← minus 3 =		* 1		X43=		1	X86=		
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT						OR		86.00	
* If	the difference	in column 1 is	less than ze	ero, enter	"0" in c	olumn 2	+145=		OR	+290=		
			MENDED - PART II			TOTAL	L	OR	TOTAL	856.00		
ļ -		(Column 1)	(Column 2			(Column 3)	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A	·	REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
AME	Independent	* NTATION OF MI	Minus	***	T C1 4114	=	X43=		OR	X86=		
	·	MATION OF MI	JUINTE DE	PENDENT	CLAIM		+145=		OR	+290=		
							TOTAL			TOTAL		
		(Column 3)	ADDIT. FEE			ADDIT. FEE						
AMENDMENT B		CLAIMS REMAINING		(Colur	EST			ADDI-	1		ADDI-	
		AFTER AMENDMENT	·	NUM PREVIO PAID	DUSLY	PRESENT EXTRA	RATE	TIONAL		RATE	TIONAL FEE	
	Total	* .	Minus	**		E	X\$ 9=		OR	X\$18=	166	
	Independent	*	Minus	***		Ξ.	X43=		OR	X86=	·	
<u> </u>	FIRST PRESE	JLTIPLE DEF	PENDENT	CLAIM				On				
							+145≡ TOTAL		OR	+290=	,	
	•					•	TOTAL · ADDIT, FEE		OR	TOTAL ADDIT, FEE		
_		(Column 1)		(Colur		(Column 3)	·					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un I			
 If the entry in column 1 is less than the entry in column 2, write "0" in column 3. 							+145=		OR [+290=		
	I the "Highest Nu	mber Previously Pa	aid For" IN THIS	S SPACE is	s less that	1 20. enler 120 "	TOTAL ADDIT. FEE		OR A	TOTAL DDIT. FEE		
	***If the *Highest Number Previously Paid For* IN THIS SPACE is less than 3, enter *3.* The *Highest Number Previously Paid For* (Total or Independent) is the highest number found in the appropriate box in column 1.											